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PTO/SB/21/(09-04)

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Application Number **Application Number** 09/807,647 TRANSMITTAL Filing Date April 16, 2001 First Named Inventor **FORM** S. Oi Art Unit 1624 **Examiner Name** B. Kifle (to be used for all correspondence after initial filing) Attorney Docket Number

Tota	al Number of	Pages in	This Submission	22	Allomey bocket Number	2560 US0			<u> </u>	
				EN	CLOSURES (Check	all that apply)			
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s)			eclaration(s) Request nent Request sure Statement	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks The Commissioner is hereby authorized to charge			After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Return Postcard			
Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53		or credit any overpayment to Deposit Account 500799.								
Firm N			SIGNA	TURE	OF APPLICANT, ATT	ORNEY, C	R AG	ENT		
Firm Name Elaine M. Ramesh, Ph.D.			I. Ramesh, Ph.D.,	JD						
Signature Elas		ne	m Ramed							
Printed	name	Elaine M	1. Ramesh							
Date il		119/04		Reg. No.	43,032					
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PTO/SB/17 (10-04)
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FEE	ETR	AN	SMI	TTAL
	for	FY	200	5

Effective 10/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

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Complete if Known					
Application Number	09/807,647				
Filing Date	April 16, 2001				
First Named Inventor	S. Oi				
Examiner Name	B. Kifle				
Art Unit	1624				
Attornov Docket No.	2560 USOP				

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Check Credit card Money Other None	3. ADDITIONAL FEES					
Deposit Account:	<u>Large</u>	Large Entity Small Entity				
Denosit	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Account Number 500799	1051	130	2051	,	Surcharge - late filing fee or oath	Lee Laid
Deposit Talanda Chamaianal Ind. 14d	1052	50	2052	25	Surcharge - late provisional filing fee or	
Account Name Takeda Chemical Ind. Ltd.	1053	130	1053	130	cover sheet Non-English specification	
The Director is authorized to: (check all that apply)		2,520			For filing a request for ex parte reexamination	
Charge fee(s) indicated below Credit any overpayments	1804	920*	1804	•	Requesting publication of SIR prior to	
Charge any additional fee(s) or any underpayment of fee(s)					Examiner action	\longrightarrow
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month	7.20
1. BASIC FILING FEE	1252	430	2252	215	Extension for reply within second month	430
Large Entity Small Entity	1253	980	2253	490	Extension for reply within third month	
Fee Fee Fee Fee Paid Fee Paid Code (\$) Code (\$)	1254	1,530	2254	765	Extension for reply within fourth month	
1001 790 2001 395 Utility filing fee	1255	2,080	2255	1,040	Extension for reply within fifth month	├ ──
1002 350 2002 175 Design filing fee	1401	340	2401	170	Notice of Appeal	
1003 550 2003 275 Plant filing fee	1402	340	2402	170	Filing a brief in support of an appeal	
1004 790 2004 395 Reissue filing fee	1403	300	2403	150	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$)	1452	110	2452	55	Petition to revive - unavoidable	<u> </u>
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453	1,330	2453	665	Petition to revive - unintentional	
Fee from	1501		2501		Utility issue fee (or reissue)	
Extra Claims below Fee Paid Total Claims -20** = X 18 =	1502	490	2502		Design issue fee	
Independent 2**- V 88	1503	660	2503		Plant issue fee	
Claims 300 =	1460	130	1460		Petitions to the Commissioner	
Large Entity Small Entity	1807	50	1807		Processing fee under 37 CFR 1.17(q)	
Fee Fee Fee <u>Fee Description</u>	1806	180	1806		Submission of Information Disclosure Stmt Recording each patent assignment per	
Code (\$)	8021	40	8021	1 40	property (times number of properties)	
1201 88 2201 44 Independent claims in excess of 3	1809	790	2809	395	Filing a submission after final rejection (37 CFR 1.129(a))	
1203 300 2203 150 Multiple dependent claim, if not paid	1810	790	2810	395	For each additional invention to be	
1204 88 2204 44 ** Reissue independent claims					examined (37 CFR 1.129(b))	
over original patent	1801	790	2801		Request for Continued Examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application	
SUBTOTAL (2) (\$)	Other	fee (sp	ecify) _			
**or number previously paid, if greater; For Reissues, see above	*Redu	ced by	Basic I	Filing F	ee Paid SUBTOTAL (3) (\$) 430.0	00

SUBMITTED BY			(Complete (if applicable))
Name (Print/Type)	Elaine M. Ramesh, Ph.D., JD	Registration No. (Attorney/Agent) 43,032	Telephone 847-383-3391
Signature	Elain m Ram	esl	Date 11/19/0-4

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